

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	<i>HLA</i>		<i>05/15/01</i>
O.I.P.E. CLASSIFIER	<i>ASD</i>		<i>6/1/01</i>
FORMALITY REVIEW	<i>CV</i>	<i>503</i>	<i>07-10-01</i>
RESPONSE FORMALITY REVIEW	<i>gph</i>	<i>1030</i>	<i>10-12-01</i>

INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral)... Canceled      A ..... Appeal  
 + ..... Restricted      O ..... Objected

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If more than 150 claims or 10 actions  
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*10-21-01*  
*617*  
*7/10*